AVIVA LIFE INSURANCE COMPANY

Non-Participating
(Annual dividends will not be paid)

Single Premium payable at Date of Issue.

Annuity payments made during the life of Annuitant.

Death Benefit during Guaranteed Period as
specified in the applicable Mode of Payment.

UNIFORM QUALIFIED ASSIGNMENT and RELEASE

"CLAIMANT"	DANIEL PORTER
"ASSIGNOR"	ONE BEACON INSURANCE GROUP
"ASSIGNEE"	AVIVA ASSIGNMENT CORPORATION
"ANNUITY ISSUER"	AVIVA LIFE INSURANCE COMPANY
"EFFECTIVE DATE"	5/12/03

THIS AGREEMENT is made and entered into by and between the parties hereto as of the Effective Date with reference to the following facts:

A. Claimant has executed a settlement agreement or release dated May 5, 2003, 2002 (the "Settlement Agreement") that provides for the Assignor to make certain periodic payments to or for the benefit of the Claimant as stated in Addendum No. 1 (the "Periodic Payments"); and

B. The parties desire to effect a "qualified assignment" within the meaning and subject to the conditions of Section 130(c) of the Internal Revenue Code of 1986 (the "Code").

NOW, THEREFORE, in consideration of the foregoing and other good and valuable consideration, the parties agree as follows:

1. The Assignor hereby assigns and the Assignee hereby assumes all of the Assignor's liability to make the Periodic Payments. The Assignee assumes no liability to make any payment not specified in Addendum No. 1.

2. The Periodic Payments constitute damages on account of personal injury or sickness in a case involving physical injury or physical sickness within the meaning of Sections 104(a)(2) and 130(c) of the Code.

3. The Assignee's liability to make the Periodic Payments is no greater than that of the Assignor immediately preceding this Agreement. Assignee is not required to set aside specific assets to secure the Periodic Payments. The claimant has no rights against the Assignee greater than a general creditor. None of the Periodic Payments may be accelerated, deferred, increased or decreased and may not be anticipated, sold, assigned, or encumbered.

4. The obligation assumed by Assignee with respect to any required payment shall be discharged upon the mailing on or before the due date of a valid check in the amount specified to the address of record.

5. This Agreement shall be governed by and interpreted in accordance with the laws of the State of Pennsylvania

6. The Assignee may fund the Periodic Payments by purchasing a "qualified funding asset" within the meaning of Section 130(d) of the Code in the form of an annuity contract issued by the Annuity Issuer. All rights of ownership and control of such annuity contract shall be and remain vested in the Assignee exclusively.

7. The Assignee may have the Annuity Issuer send payments under any "qualified funding asset" purchased hereunder directly to the payee(s) specified in Addendum No. 1. Such direction of payments shall be solely for the Assignee's convenience and shall not provide the Claimant or any payee with any rights of ownership or control over the "qualified funding asset" or against the Annuity Issuer.

8. Assignee's liability to make the Periodic Payments shall continue without diminution regardless of any bankruptcy or insolvency of the Assignor.

9. In the event the Settlement Agreement is declared terminated by a court of law or in the event that Section 130(c) of the Code has not been satisfied, this Agreement shall terminate. The Assignee shall then assign ownership of any "qualified funding asset" purchased hereunder to Assignor, and Assignee's liability for the Periodic Payments shall terminate.

10. This Agreement shall be binding upon the respective representatives, heirs, successors and assigns of the Claimant, the Assignor and the Assignee and upon any person or entity that may assert any right hereunder or to any of the Periodic Payments.

11. The Claimant hereby accepts Assignee's assumption of all liability for the Periodic Payments and hereby releases the Assignor from all liability for the Periodic Payments.

ASSIGNOR: ONE BEACON INSURANCE GROUP

BY: ______________, SCR

TITLE: Senior Claim Representative

ASSIGNEE: AVIVA ASSIGNMENT CORPORATION

BY: ______________

TITLE: Vice President

CLAIMANT: ______________
Daniel Porter

Approved as to Form and Content:

BY: ______________
Joel H. Ziev, Esq.

ADDENDUM NO. 1
DESCRIPTION OF PERIODIC PAYMENTS

Benefits:

Payee: Daniel Porter

Five Hundred Fifty-Five Dollars and Eight Cents ($555.08), payable quarterly, beginning July 2, 2004 for a period certain of thirteen (13) years with the last guaranteed payment due on April 2, 2017; and,

Two Hundred Seventy-Five Dollars and No Cents ($275.00), payable monthly, beginning 7/2/2017 for the lifetime of Daniel Porter, with the additional guarantee that no less than 144 payments shall be made. The last guaranteed payment is due on June 2, 2029.

INITIALS

ASSIGNOR: ______

CLAIMANT: ______

ASSIGNEE: ______

AVIVA

Aviva Life Insurance Company 108 Myrtle Street North Quincy MA 02171 www.avivausa.com

July 1, 2003

Mr. Daniel Allen Porter
3208 South 2nd Street
White Hall, PA 18052

GUARANTEE

Aviva Life Insurance Company, a Delaware domiciled insurer, does hereby guarantee the obligation undertaken by Aviva Assignment Corporation (Assignee), a Delaware corporation, pursuant to the following described assignment:

Assignor: One Beacon Insurance Group

Assignee: Aviva Assignment Corporation

Date of Assignment: May 12, 2003

Contract Number: SS475143

Sincerely,

Sean O'Brien
Asst. Vice President